PATENT APPLICATION FEE DETERMINATION RECORD 107517587 Effective December 8, 2004													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
U.S	. NATIONAL S	STAGE FEES						RATE	FEE		RATE ·	FEE	
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT, = \$ 300			BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE			Satisties PCT Article 33(1)- (4) = \$ 50 / \$ 100		All other situations = \$ 100 / \$ 200			EXAM. FEE			EXAM FEE	200	
SEARCH FEE			U.S. is ISA = \$50/\$100 ALL other countries = \$ 200/\$400		All other physicians * \$ 250 / \$ 500			SEARCH FEE			SEARCH FEE	500	
FEE FOR EXTRA SPEC. PGS.			าน์ภา	nus 100 =	/ 50 =			X \$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			16 m	inus 20 =				X \$ 25 =		OR	X-\$ 50 =		
INDEPENDENT CLAIMS			′3 ·	ninus 3 =	•			X \$ 100 =	-	OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAUM PRE	SENT					+\$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "O" in column 2								TOTAL		OR	TOTAL	1,800	
	CLAIMS AS AMENDED - PART II (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	./6	Minus	-/	0	. ~		X \$ 25 =		OR	X \$ 50 =		
NO SE	Independent	• 3	Minus	-	5	• —		X \$ 100 =		OR	X \$ 200 =		
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$180=		OR	+ \$ 380 =		
TOTA										OR	TOTAL ADDIT. FEE		
ユ	120/16	49-1		(Cotur	2 \	(Column 3)					,	·	
8	2100	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	est Ber Wsly	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENT	Total		Minus	-2	0	- 1		X \$ 25 =		OR	X \$ 50 =		
AMENDA	Independent	• 3	Minus	ee [3	• / .		X \$ 100 =		OR	X \$ 200 =		
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				CLAIM			+\$180=		OR	+ \$ 360 =		
	<u> </u>	·	·	•	TOTAL ADDIT. FEE		OR	YOTAL ADDIT. FEE					
* If the entry is column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.													